EXHIBIT JJ

Estate of Karen Mesiha

VCF Documentation



August 27, 2018

SHERIF MESIHA C/O WENDELL TONG SULLIVAN PAPAIN BLOCK MCGRATH & CANNAVO, PC 120 BROADWAY 18TH FLOOR NEW YORK NY 10271

Dear SHERIF MESIHA:

The September 11th Victim Compensation Fund ("VCF") has reviewed your Eligibility Form. You submitted an Eligibility Form on behalf of KAREN MESIHA. Your claim number is VCF0100941. Your Eligibility Form was determined to be substantially complete on August 24, 2018. As stated in the Regulations and on the claim form, by filing a substantially complete Eligibility Form, you have waived your right to file or be a party to a September 11th-related lawsuit on behalf of the decedent and his or her survivors.

The Decision on your Claim

The VCF has determined that the decedent has met the eligibility criteria established in the statute and regulations. Based on the information you submitted and information the VCF has received from the World Trade Center ("WTC") Health Program, the decedent has been found eligible for the following injuries:

- CHRONIC BRONCHITIS
- CHRONIC RHINITIS
- MALIGNANT NEOPLASM OF FEMALE BREAST AND RELATED PHYSICAL CONDITIONS: MALIGNANT NEOPLASM UPPER LOBE BRONCHUS OR LUNG; MALIGNANT NEOPLASM OF LIVER AND INTRAHEPATIC BDS; ESOPHAGEAL REFLUX; DRUG-INDUCED POLYNEUROPATHY
- UNSPECIFIED ASTHMA

Please note that there are several reasons why an injury that you think should be eligible is not listed above. For non-traumatic injuries, the name of the injury is based on the information provided by the WTC Health Program and there may be different names for the same injury. Additionally, your injury may not be listed if it was only recently certified for treatment by the WTC Health Program.

If in the future the WTC Health Program should notify you that a condition previously found eligible is no longer certified, you must inform the VCF as this may affect your eligibility status and/or the amount of your award.



What Happens Next

If the decedent was certified for treatment by the WTC Health Program for a condition not listed above, you should amend your claim. Please see the VCF website for details on how to amend your claim. The VCF will review the new information and determine if it provides the basis for a revised decision.

If you believe the decedent had eligible injuries not treated by the WTC Health Program and you would like the VCF to consider those injuries before calculating the amount of any compensation, you should amend your claim. If you choose to amend your claim, you will need to use the VCF Private Physician process. The Private Physician process is a way for the VCF to gather the required information about the decedent's treatment in order to process your claim. All forms are available on the VCF website under "Forms and Resources." The website also includes detailed information and instructions on the Private Physician process.

If the decedent did not have injuries other than those listed above, you should submit your Compensation Form and required supporting materials. If you have already submitted your Compensation Form, you do not need to take any action at this time unless you receive a request from the VCF for missing information. The VCF will calculate the amount of any compensation based on the conditions listed above after all compensation-related documents are submitted.

If you have questions about the information in this letter or the claims process in general, please call our toll-free Helpline at 1-855-885-1555. For the hearing impaired, please call 1-855-885-1558 (TDD). If you are calling from outside the United States, please call 1-202-514-1100.

Sincerely,

Rupa Bhattacharyya Special Master September 11th Victim Compensation Fund

cc: SHERIF MESIHA



November 21, 2019

SHERIF MESIHA C/O WENDELL TONG SULLIVAN PAPAIN BLOCK MCGRATH & CANNAVO, PC 120 BROADWAY 18TH FLOOR NEW YORK NY 10271

Dear SHERIF MESIHA:

The September 11th Victim Compensation Fund ("VCF") has reviewed your claim for compensation. Your claim number is VCF0100941. Your Compensation Form was determined to be substantially complete on October 11, 2019. This means your claim was deemed "filed" for purposes of section 405(b)(3) of the Statute on that date.

The VCF has reviewed the information you submitted and calculated the amount of your award. When determining the amount of your loss, the VCF calculates the amount of your economic and non-economic loss and then is required to subtract the amount of any payment you have received, or are entitled to receive, from any source that meets the definition of collateral offsets under the Statute and regulations. Because the amount of your collateral offset payments exceeds the total amount of your economic and non-economic loss, your award is \$0.00.

This determination is in accordance with the requirements of the VCF Permanent Authorization Act. The enclosed "Award Detail" includes a detailed explanation of the calculation and a list of the eligible conditions included in this determination.

The VCF did not compute any additional lost earnings as the value of such loss was already compensated in the paid personal injury claim.

In making this determination, the VCF considered and took into account the \$1,180,249.00 award your wife received from her personal injury claim. The award includes non-economic losses attributed to personal injury prior to your wife's death and the non-economic losses associated with the wrongful death claim, as well as reimbursement for replacement services and burial expenses. As shown in the detailed breakdown of the award, the collateral offsets applicable to the wrongful death losses were not applied to the personal injury award. The award offsets the \$1,180,249.00 award your wife received from her personal injury claim, which results in a conclusion that the losses suffered by and on account of your wife's death have already been fully compensated under applicable VCF policies.

What Happens Next

The VCF will deem this award to be final unless you complete and return the enclosed Compensation Appeal Request Form within **30 days from the date of this letter** as explained below.

• Appealing the Award: You may request a hearing before the Special Master or



her designee if you believe the amount of your loss was erroneously calculated or if you believe you can demonstrate extraordinary circumstances indicating that the calculation does not adequately address your claim.

To request a hearing, you must complete and return the enclosed Compensation Appeal Request Form <u>and</u> Pre-Hearing Questionnaire no later than **30 calendar days** from the date of this letter. The VCF will notify you in writing of your scheduled hearing date and time and will provide additional instructions to prepare for your hearing. If both forms are not submitted with complete information within 30 days, you have waived your right to appeal.

• Amending your Claim: You may amend your claim in the future if your circumstances change and you have new information to provide to the VCF that you believe warrants additional compensation. The VCF website has important information about the specific circumstances when it is appropriate to request an amendment. For more information and examples of such situations, please refer to "Section 5 – Amendments" in the VCF Policies and Procedures document available under "Forms and Resources" on the VCF website. Please review the information carefully when deciding whether to amend your claim. If you submit an amendment, the VCF will review the new information and determine if it provides the basis for a revised decision.

When considering whether to amend your claim, please review the amount of your economic and non-economic loss award, and the amount by which that award was reduced due to collateral offsets. You should consider whether these offsets will exceed the new loss you are seeking. If your offsets are substantially higher than the loss you are claiming through the amendment, the amendment will not result in a change to your net total award. In these situations, the VCF does not recommend submitting the amendment. For more information and examples of such situations, please refer to "Section 5 – Amendments" in the VCF Policies and Procedures document available under "Forms and Resources" on the VCF website.

Your award was calculated using our published regulations, and I believe it is fair and reasonable under the requirements of the VCF Permanent Authorization Act. As always, I emphasize that no amount of money can alleviate the losses suffered on September 11, 2001.

If you have any questions, please call our toll-free Helpline at 1-855-885-1555. For the hearing impaired, please call 1-855-885-1558 (TDD). If you are calling from outside the United States, please call 1-202-514-1100.

Sincerely,

Rupa Bhattacharyya Special Master September 11th Victim Compensation Fund

cc: SHERIF MESIHA



Award Detail

Claim Number: VCF0100941
Decedent Name: KAREN MESIHA

| PERSONAL INJURY CLAIM (Losses up to Date of Death) | |
|--|--------------|
| | |
| Lost Earnings and Benefits | |
| Loss of Earnings including Benefits and Pension | \$0.00 |
| Mitigating or Residual Earnings | \$0.00 |
| Total Lost Earnings and Benefits | \$0.00 |
| Officete Applicable to Loct Fermings and Deposite | |
| Offsets Applicable to Lost Earnings and Benefits | Ф0.00 |
| Disability Pension | \$0.00 |
| Social Security Disability Benefits | \$0.00 |
| Workers Compensation Disability Benefits | \$0.00 |
| Disability Insurance | \$0.00 |
| Other Offsets related to Earnings | \$0.00 |
| Total Offsets Applicable to Lost Earnings | \$0.00 |
| | |
| Total Lost Earnings and Benefits Awarded | \$0.00 |
| Other Economic Losses | |
| Medical Expense Loss | \$0.00 |
| Replacement Services | \$0.00 |
| Total Other Economic Losses | \$0.00 |
| | |
| Total Economic Loss | \$0.00 |
| Total Non-Economic Loss | \$400,000.00 |
| Subtotal Award for Personal Injury Claim | \$400,000.00 |



| DECEASED CLAIM (Losses from Date of Death) | |
|---|----------------|
| Loss of Earnings including Benefits and Pension | |
| 2000 Of Editining morading Bottonio and Foliolon | |
| Offsets Applicable to Lost Earnings and Benefits | |
| Survivor Pension | |
| SSA Survivor Benefits | |
| Worker's Compensation Death Benefits | |
| Other Offsets related to Earnings | |
| Total Offsets Applicable to Loss of Earnings and Benefits | |
| Total Lost Earnings and Benefits Awarded | \$0.00 |
| Total Lost Lamings and Benefits Awarded | ψ0.00 |
| Other Economic Losses | |
| Replacement Services | \$419,669.00 |
| Burial Costs | \$9,394.00 |
| Total Other Economic Losses | \$429,063.00 |
| Total Economic Loss | \$429,063.00 |
| Non-Economic Loss | |
| Non-Economic Loss - Decedent | \$250,000.00 |
| Non-Economic Loss - Spouse/Dependent(s) | \$200,000.00 |
| Total Non-Economic Loss | \$450,000.00 |
| Additional Offsets | |
| Social Security Death Benefits | (\$255.00) |
| Life Insurance | (\$104,289.85) |
| Other Offsets | \$0.00 |
| Total Additional Offsets | (\$104,544.85) |
| | - |
| Subtotal Award for Deceased Claim | \$774,518.15 |



| Subtotal of Personal Injury and Deceased Claims | \$1,174,518.15 | |
|---|------------------|--|
| PSOB Offset | \$0.00 | |
| Prior Lawsuit Settlement Offset | \$0.00 | |
| Award Paid on Prior Personal Injury Claim | (\$1,180,249.00) | |
| Total Revised Award | -\$5,730.85 | |
| Previously Paid Award | \$0.00 | |
| TOTAL AWARD | \$0.00 | |
| | | |
| Factors Underlying Economic Loss Calculation | | |
| Annual Earnings Basis (without benefits) | | |
| Percentage of Disability attributed to Eligible Conditions - | | |
| applicable to Personal Injury losses | | |
| Start Date of Loss of Earnings Due to Disability - applicable | | |
| to Personal Injury losses | | |

| Eligible Conditions Considered in Award |
|--|
| Chronic Bronchitis |
| Chronic Rhinitis |
| Malignant Neoplasm of Female Breast and Related Physical Conditions: Malignant |
| Neoplasm Upper Lobe Bronchus Or Lung; Malignant Neoplasm of Liver and |
| Intrahepatic Bds; Esophageal Reflux; Drug-induced Polyneuropathy |
| Unspecified Asthma |

Family Member Affidavits

Sherif Mesiha

| SOUTHERN DISTRICT OF | NEW YORK | |
|--|-----------------|-------------------------------|
| In Re: | | |
| TERRORIST ATTACKS ON SEPTEMBER 11, 2001 | 1 - | 03-MDL-1570 (GBD)(SN) |
| RAYMOND ALEXANDER | | AFFIDAVIT OF SHERIF MESIHA |
| | Plaintiffs, | 21-CV-03505 (GBD)(SN) |
| V. | | |
| ISLAMIC REPUBLIC OF IF | RAN, | |
| | Defendant. X | |
| STATE OF NEW YORK) COUNTY OF NASSAU) | : SS | |

SHERIF MESIHA, being duly sworn, deposes and says:

- I am a plaintiff in the within action, am over 18 years of age, and reside at
 Winthrop Avenue Syosset, New York 11791.
 - 2. I am currently 45 years old, having been born on October 23, 1978.
- 3. I am the husband of Decedent, Karen Mesiha, upon whose death my claims are based. I submit this Affidavit in support of the present motion for a default money judgment for the claim made on behalf of my wife's estate and for my solatium claim. On March 23, 2016, I was issued Letters of Administration as Administrator of my wife's estate by the Nassau County Surrogate's Court.
- 4. My wife passed away from Metastatic Breast Cancer on December 12, 2015, at the age of 54. It was medically determined that this illness was causally connected to her exposure to the toxins resulting from the September 11, 2001, terrorist attacks at the World Trade Center.

My wife, Karen, was working in the World Trade Center. She worked in a

law firm for professional development. We went on vacations, to the beach, the gym, and

sport events. The special memories with my wife include the way she used to decorate

the Christmas tree and make the house full of light, happiness, and love. When we went

out to eat, she had the best taste in food and knew a lot of information about different

cultures and their food.

6. During the 9/11 attack, my wife was making coffee in her law firm office when the

plane hit. She was on the 56th floor getting ready to work for the day. She was able to escape 5

minutes before the tower collapsed.

7. My wife had stage 4 breast cancer; it changed our lives forever. We would go to

hospitals on a weekly basis, sometimes 3 times a week. We would go to Memorial Sloan Kettering,

Cornell, and Pennsylvania Hospital in one week to get treatment for her illness. It was 5 years of

sadness and getting to know most of the hospitals in the states. We had no quality of life. Our lives

involved hospitals and treatments. We could not go anywhere because of the treatments she

received.

8. My life changed forever when my wife passed away from cancer. Her death affected

my work because I had to raise my child alone. I focused more on raising her than work. It had a

big effect on my income. My child and I's mental health got affected, too. Her death was

tremendous on my child, still until this day. That is a pain that Lean't explain in words.

SHERIF MESIHA

Sworn before me this

day of Ochker, 2023

Notary public

Notary Public - State of New York
NO. 01MC6310234
My Commission Expires Aurory